



# *Rural Health*

## Disparities and Inequalities

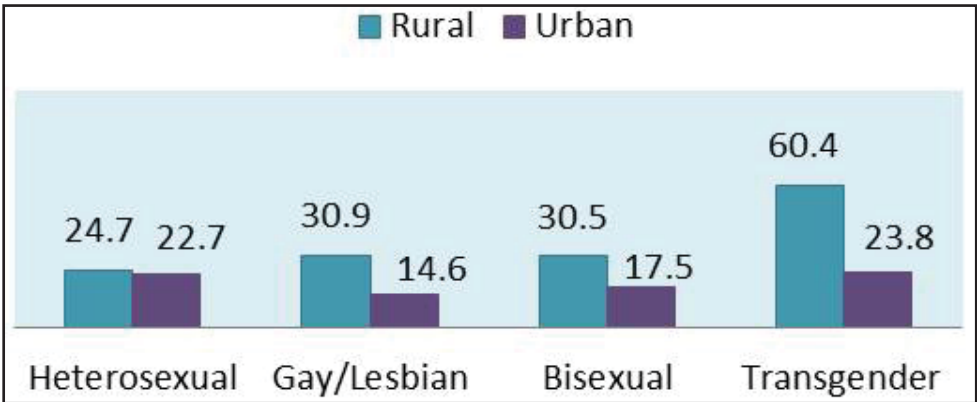
# Lesbian, Gay, Bisexual, Transgender (LGBT)

## Health in Rural Missouri

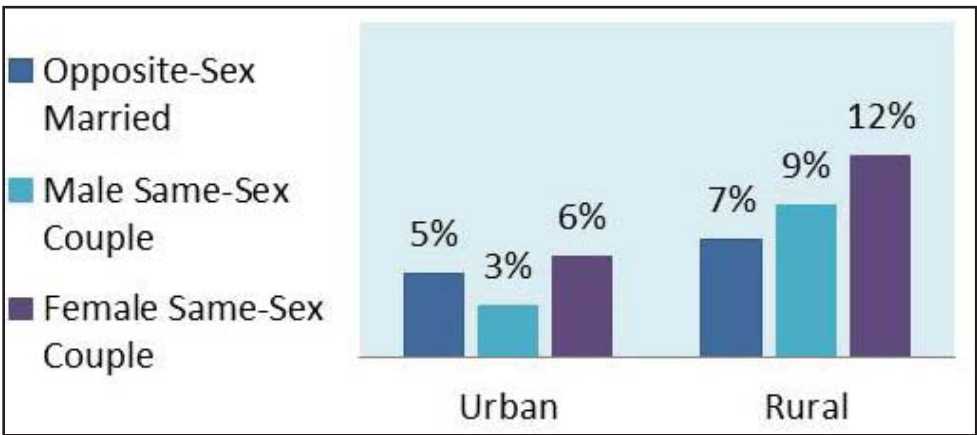
The acronym LGBT refers to lesbians, gay men, bisexual women/men, transgender persons, and individuals who do not conform to gender identity norms (LGBT includes these population groups but is not exclusive to these groups). Each individual in the LGBT community presents its own unique health concerns.<sup>6</sup> LGBT individuals experience poorer health outcomes than their peers in the general population. LGBT health disparities are a result of several different factors including the influence of stigma and systematic discrimination; limited availability of culturally proficient health care access and differential access to health insurance coverage.<sup>6</sup> These poor outcomes combined with the inadequate health care access of many rural areas results in significant health inequalities for LGBT individuals in rural Missouri.<sup>4,6</sup>

Factors such as economic and social influences have an effect on the physical and mental health of LGBT individuals. This has the potential to lead to social isolation, psychological distress, anxiety, depression, low self-esteem and the physical ailments associated with a poor mental health status. The amount of individuals who identify as gay or lesbian are twice as likely not to have healthcare coverage in rural Missouri than urban; transgender individuals in rural areas are three times more likely not to have coverage (Figure 1).<sup>2</sup> Same-sex couples are more likely to live below the federal poverty level, specifically same-sex couples in rural areas of the state (Figure 2).<sup>6</sup>

**Figure 1. Percent of People with No Health Care Coverage by Sexual Orientation/Identity and Geography, 2011<sup>2</sup>**



**Figure 2. Percent of Poor Households by Sexual Orientation in Urban and Rural Missouri, 2009<sup>6</sup>**



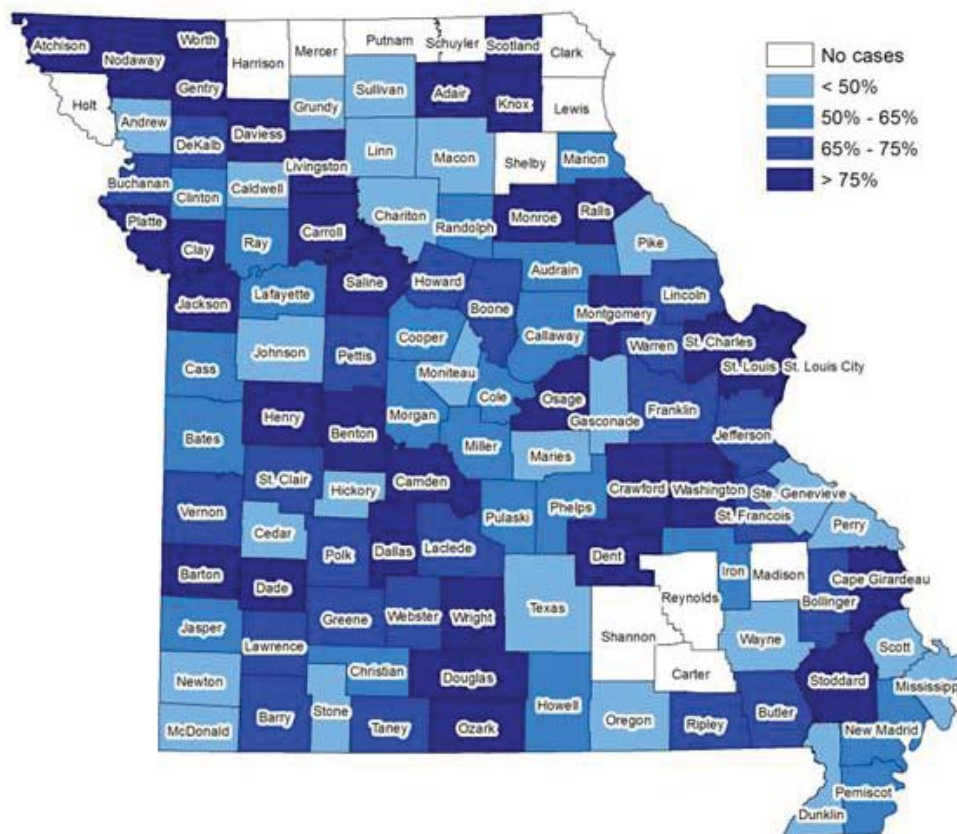
## Transgender Care

- 16.3% percent of transgender people in Missouri did not receive needed medical care in rural areas compared with 10% in urban areas.<sup>2</sup>
- The majority of health insurers do not cover trans-specific care; including Medicaid, Medicare and Veteran plans.<sup>6</sup>
- Trans-specific care includes hormone treatments, sex or gender reassignment surgeries and care related to the transition.<sup>6</sup>
- Missouri is one of 22 states that explicitly excludes transition-related care on Medicaid.<sup>6</sup>
- As of January 2016, 20% of rural Missourians were listed as being on Medicaid.<sup>6</sup>
- Without sex reassignment surgery, transgender individuals in Missouri cannot legally change the gender on their birth certificate or license.<sup>7</sup>
- Transgender individuals often attempt unconventional care due to lack of coverage, increasing the chances of additional health concerns.<sup>6</sup>

## LGBT and HIV/AIDS

- The majority of new HIV cases among males in Missouri are attributed to men who have sex with men (MSM).<sup>1</sup>
- There were 485 newly diagnosed HIV cases (male and female) in Missouri in 2014. Of those, 404 were men and 301 were reported as MSM.<sup>3</sup>
- In 2014, 62.1% of all HIV cases (male and female) newly diagnosed in 2014 were transmitted through MSM, 3.9% through MSM and injection drugs, and 2.1% through injection drugs.<sup>3</sup>
- 74.5% of new male HIV cases in Missouri were transmitted through MSM, 4.7% from MSM and injection drugs, and 2.5% from injection drugs.<sup>3</sup>
- The map in Figure 3 displays the geographical distribution of the proportion of men living with HIV that reported MSM as the mode of transmission, 2014.<sup>3</sup>
- The percent of living HIV cases through MSM transmission by race/ethnicity and geographical area is depicted in Figure 4.1.

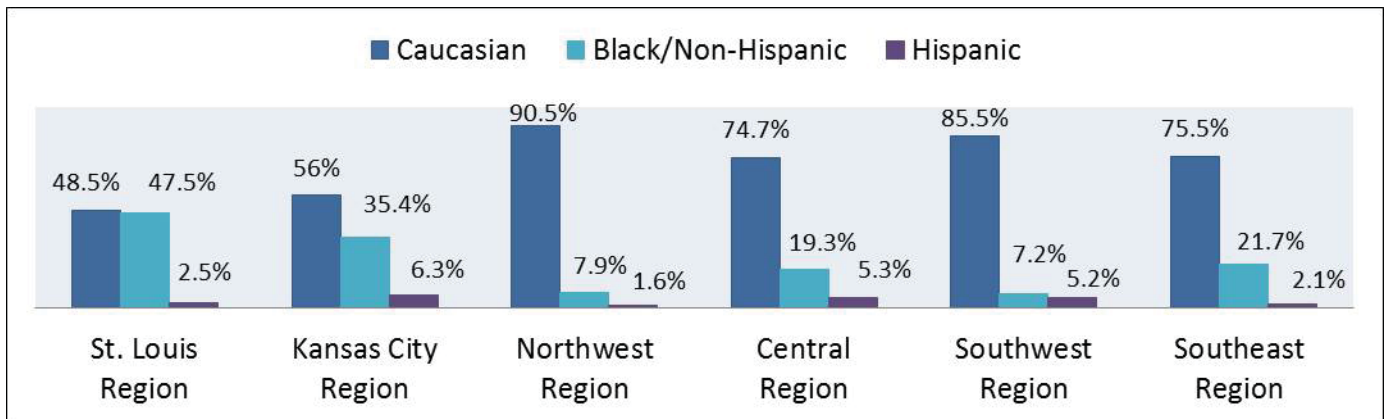
**Figure 3. Proportion of Men Living with HIV that Reported MSM as Mode of Transmission, 2014<sup>3</sup>**



*\*Excludes persons most recently diagnosed in Missouri correctional facilities*



**Figure 4. Living HIV Cases in Men who Have Sex with Men, by Race/Ethnicity and Geographic Area, 2014 1**



## *LGBT Health & Patient Rights*

- LGBT status is significantly underreported in Missouri, limiting available data; especially when comparing rural vs urban areas of the state.<sup>6,2</sup>
- The percent of LGBT individuals who did not receive needed medical care due to cost or lack of insurance was higher in rural areas compared with urban.<sup>2</sup>
- LGBTs in Missouri are more than twice as likely to do without surgery or medical care when needed for fear of bias and discrimination.<sup>6</sup>
- Informing providers of one's sexual orientation and/or gender identity can assist in diagnosis and treatment of certain illnesses.<sup>6</sup>



# Sources

<sup>1</sup>Missouri Department of Health and Senior Services. 2014 Epidemiological Profiles of HIV, STD, and Hepatitis in Missouri. Accessed March 16, 2016 at <http://health.mo.gov/data/hivstdaids/pdf/MOHIVSTD2014.pdf>.

<sup>2</sup>Missouri Department of Health and Senior Services. 2011 County Level Study. Special Report; Arthur Pashi DHSS.

<sup>3</sup>Missouri Department of Health and Senior Services. Bureau of Reportable Disease Informatics: enhanced HIV/AIDS Reporting System (eHARS). Reported February 28, 2015.

<sup>4</sup>Missouri Department of Health and Senior Services. Health in Rural Missouri: Biennial Report, 2014-2015. Accessed March 15, 2016.

<sup>5</sup>Missouri Department of Health and Senior Services. MICA: Medicaid Records. Accessed March 17, 2016 at <http://health.mo.gov/data/mica/MICA/>.

<sup>6</sup>Missouri Foundation for Health . Health Equity Series: Responding to LGBT Health Disparities, August 2012. Accessed March 15, 2016 at <https://www.mffh.org/mm/files/LGBTHealthEquityReport.pdf>.

<sup>7</sup>National Center for Transgender Equality. Missouri. Accessed April 4, 2016 at <http://www.transequality.org/documents/state/missouri>.

<sup>8</sup>PROMO. LGBT Health. Accessed April 4, 2016 at <https://promoonline.org/lgbt-health.html>.



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